Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 1 of 55

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

B 101

Part 1: Identify Yourself

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|---|
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Lakeisha First name K | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Staten Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1061 | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 2 of 55

Debtor 1 Lakeisha K Staten

Document Page 2 of 55

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | | |
| | | 1696 Orchard Street Des Plaines, IL 60018 | | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Cook County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

Debtor 1 Lakeisha K Staten

Document Page 3 of 55 Case number (if known)

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
|-----|---|---|--|--|--|--|--|--|--|
| | choosing to file under | Chapter 7 | | | | | | | |
| | | ☐ Ch | apter 11 | | | | | | |
| | | ☐ Ch | apter 12 | | | | | | |
| | | ☐ Ch | apter 13 | | | | | | |
| 8. | How you will pay the fee | | about how yo | pay the entire fee when I file my petition. Please check with the clerk's office in your local court for mo to how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, on the control of the control o | | | | | |
| | ☐ I need to pay the fee in installments. If you choose this option, sign ar The Filing Fee in Installments (Official Form 103A). | | | | | on, sign and attach the Application for Individuals to Pay | | | |
| | | | request that out is not requal that applies to | t my fee be wa uired to, waive y o your family siz | lived (You may request this option your fee, and may do so only if you and you are unable to pay the form | n only if you are filing for Chapter 7. By law, a judge may ur income is less than 150% of the official poverty line ee in installments). If you choose this option, you must Official Form 103B) and file it with your petition. | | | |
| Э. | Have you filed for bankruptcy within the | ■ No. | | | | | | | |
| | last 8 years? | ☐ Yes | i. | | | | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| 0. | Are any bankruptcy cases pending or being | ■ No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | i. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ne 12. | | | | | |
| | | ☐ Yes | . Has yo | ur landlord obta | lined an eviction judgment agains | t you and do you want to stay in your residence? | | | |
| | | | | No. Go to line | 12. | | | | |
| | | | | | | Judgment Against You (Form 101A) and file it with this | | | |

| | | Document | Page 4 of 55 | |
|----------|-------------------|----------|------------------------|--|
| Debtor 1 | Lakeisha K Staten | | Case number (if known) | |

| ar | 3: Report About Any Bu | sinesses ` | You Own | as a Sole Proprietor | | | | |
|-----|---|-------------------------------------|---|---|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | e and location of business | | | | |
| | A sole proprietorship is a | | | | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | e of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | per, Street, City, State & ZIP Code | | | | |
| | it to this petition. | | Chec | k the appropriate box to describe your business: | | | | |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | | None of the above | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor? | deadlines operation in 11 U.S | s. If you ir is, cash-fl i.C. 1116(| der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B). not filing under Chapter 11. | | | | |
| | For a definition of small | No. | ı aiii i | iot illing under Chapter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am f | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| ar | 4: Report if You Own or | Have Anv | Hazardo | ous Property or Any Property That Needs Immediate Attention | | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. ☐ Yes. | What is | the hazard? | | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs | | | diate attention is why is it needed? | | | | |
| | immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | s the property? | | | | |
| | | | | Number, Street, City, State & Zip Code | | | | |

Page 5 of 55 Document Case number (if known) Debtor 1 Lakeisha K Staten

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a Incapacity.

mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

My physical disability causes Disability. П

> me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active П military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive | a briefing | about | credit |
|------------------------------|------------|-------|--------|
| counseling because of: | _ | | |

I have a mental illness or a mental Incapacity.

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Lakeisha K Staten

Document Page 6 of 55

Case number (if known)

| Par | 6: Answer These Questi | ons for Rep | orting Purposes | | | | | | |
|-----|---|--|--|--|---|--|---|--|--|
| 16. | What kind of debts do you have? | ir _ | idividual primarily for a personal, | | ned in 11 U.S.C. § 101(8) as "incurred by an | | | | |
| | | | ☐ No. Go to line 16b. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | | |
| | | | No. Go to line 16c. | | | | | | |
| | | | | | | | | | |
| | | 16c. S | tate the type of debts you owe th | nat are not consumer debts or busine | ss debts | | | | |
| 17. | Are you filing under | □ No. I | am not filing under Chapter 7. G | o to line 18. | | | | | |
| | Chapter 7? | LI NO. | annier ming ander enapter in e | | | | | | |
| | Do you estimate that after any exempt property is excluded and | | am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrate are paid that funds will be available to distribute to unsecured creditors? | | | | | | |
| | administrative expenses are paid that funds will | | No | | | | | | |
| | be available for distribution to unsecured creditors? | |] Yes | | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | □ 25,001-50,000 | | | | |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 | 5 0,001-100,000 | | | | |
| | | □ 100-199 □ 200-999 | | ☐ 10,001-25,000 | ☐ More than100,000 | | | | |
| 19. | How much do you estimate your assets to be worth? | | | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | | |
| 20. | How much do you estimate your liabilities to be? | □ \$0 - \$50,000 □ \$50,001 - \$100,000 ■ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | abilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,000 □ \$100,001 - \$100 million □ \$10,000,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000,000 □ \$100,000 □ \$100,000 □ \$100,000,000 □ \$100,00 | | | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion | | |
| Par | 7: Sign Below | | | | | | | | |
| For | you | I have exan | nined this petition, and I declare | under penalty of perjury that the infor | mation provided is true and correct. | | | | |
| | | | | n aware that I may proceed, if eligible available under each chapter, and I cl | e, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7. | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | | |
| | | | | | | | | | |
| | | bankruptcy 1519, and 3 | derstand making a false statement, concealing property, or obtaining money or property by fraud in connection with a kruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 9, and 3571. | | | | | | |
| | | /s/ Lakeish Lakeisha I Signature o | | Signature of Debto | т 2 | | | | |
| | Executed on December 23, 2015 Executed on MM / DD / YYYYY MM / DD / YYYYY | | | | | | | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 7 of 55

Debtor 1 Lakeisha K Staten

Document Page 7 01 55

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Israel Moskovits | Date | December 23, 2015 |
|--|--------------|-----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| | | |
| Israel Moskovits | | |
| Printed name | | |
| THE SEMRAD LAW FIRM, LLC | | |
| Firm name | | |
| 20 S. Clark Street | | |
| 28th Floor | | |
| Chicago, IL 60603 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (312) 913 0625 | mail address | rsemrad@semradlaw.com |
| 6302579 | | |
| Bar number & State | | |

| | | DOGUIII | eni Paue a oros | |
|---------------------|-------------------------|-------------------|-----------------|--|
| Fill in this inform | nation to identify your | case: | | |
| Debtor 1 | Lakeisha K Staten | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | assets of what you own |
|-----|--|------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 25,942.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 25,942.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 27,257.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 150,545.21 |
| | Your total liabilities | \$ | 177,802.21 |
| Pai | rt 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,725.54 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,721.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other s | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Case 15-43199 Doc 1 Document

Page 9 of 55 Case number (if known) Debtor 1 Lakeisha K Staten

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,835.86 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | al claim |
|--|------|------------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 126,834.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 126,834.00 |

| | | asc 10 40100 Bo | Document Document | Page 10 of 55 | 10 14:02:10 | 300 IVIGITI |
|------------------|-------------------------|----------------------------------|---|----------------------------|-------------------------|---|
| Fill in | this info | rmation to identify your cas | se and this filing: | | | |
| Debto | or 1 | Lakeisha K Staten | | | | |
| 5.1. | • | First Name | Middle Name | Last Name | | |
| Debto (Spouse | or 2 e, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | | |
| United | d States B | ankruptcy Court for the: NC | ORTHERN DISTRICT OF ILLI | INOIS | | |
| Case | number | | | | | ☐ Check if this is an |
| | | | | <u> </u> | | amended filing |
| | | | | | | |
| Offi. | oial E | orm 1061/D | | | | |
| | | orm 106A/B | | | | |
| Sci | nedu | le A/B: Propei | rty | | | 12/15 |
| | | | ms. List an asset only once. If a | | | |
| | | | sible. If two married people are fi this form. On the top of any add | | | |
| Part 1: | Describe | Fach Residence Building La | nd, or Other Real Estate You Ow | n or Have an Interest In | | |
| r art r. | Describe | . Lacif Residence, Building, La | na, or other rear Estate roa on | The ridge diffillerest in | | |
| 1. Do y | ou own or | have any legal or equitable inte | erest in any residence, building, | land, or similar property? | | |
| _, | No. Go to Pa | 0 | | | | |
| _ | | | | | | |
| ЦΥ | es. Where | is the property? | | | | |
| Part 2: | Describe | Your Vehicles | | | | |
| | | | | | | |
| | | | | | | |
| 3.1 | Make: | Hyundai | Who has an interest in th | e property? Check one. | | claims or exemptions. Put red claims on Schedule D: |
| | Model: | Elantra | Debtor 1 only | | | aims Secured by Property. |
| | Year: | 2007 | Debtor 2 only | | Current value of the | Current value of the |
| | Approxima | te mileage: 19000 | Debtor 1 and Debtor 2 | only | entire property? | portion you own? |
| | Other info | | At least one of the debt | tors and another | | |
| | Value pe | er KBB | | | \$1,260.00 | \$1,260,00 |
| | | | Check if this is comm (see instructions) | unity property | Ψ1,200.00 | Ψ1,200.00 |
| | | | <u> </u> | | | |
| 3.2 | Make: | Lincoln | Who has an interest in th | e property? Check one. | | claims or exemptions. Put |
| | Model: | MKS | Debtor 1 only | - p p y | | red claims on Schedule D: aims Secured by Property. |
| | Year: | 2010 | Debtor 2 only | | Current value of the | |
| | Approxima | ite mileage: 90000 | | only | entire property? | Current value of the portion you own? |
| | Other info | mation: | At least one of the debt | • | | |
| | Value pe | er KBB | | | Ф0.040.00 | #0.040.00 |
| | | | Check if this is comm | unity property | \$9,919.00 | \$9,919.00 |
| | | | (see instructions) | | | |
| | | - . | | | Do not doduct socured a | claims or exemptions. Put |
| 3.3 | Make: | Toyota | Who has an interest in th | e property? Check one. | the amount of any secur | red claims on Schedule D: |
| | Model: | Corolla | Debtor 1 only | | Creditors Who Have Cla | aims Secured by Property. |
| | Year: | 2005 | Debtor 2 only | | Current value of the | Current value of the |
| | Approxima Other info | te mileage: 125333 | _ = :::: | • | entire property? | portion you own? |
| 1 | Value pe | | At least one of the debt | ors and another | | |
| | | ed with Sister | ☐ Check if this is comm | unity property | \$2,871.00 | \$2,871.00 |
| | Surrend | ering Interest | (see instructions) | · · · · | | |

Official Form 106A/B

| | Case 15-4 | | oc 1 Filed 12/23/15 Document | Page 11 of 55 | | esc Main |
|--------------------------|---|-------------------|---|-----------------------------|----------------------------|---|
| Debtor 1 | 1 Lakeisha K S | taten | | Ca | ase number (if known) | |
| | Make: Mercedes CL500 | Benz | Who has an interest in the | e property? Check one. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. |
| Υ | 'ear: 2003 | | Debtor 2 only | | Current value of the | Current value of the |
| Α | pproximate mileage: | 7500 | | only | entire property? | portion you own? |
| _0 | Other information: | | At least one of the deb | tors and another | | |
| | alue per KBB | | | | \$5,556.00 | \$5,556.00 |
| | co-signed with Hus | sband | Check if this is comm (see instructions) | nunity property | | - 43,330.00 |
| | oles: Boats, trailers, | | Vs and other recreational veloal watercraft, fishing vessels, s | | | |
| | | | ou own for all of your entries Vrite that number here | | | \$19,606.00 |
| Part 3: | Describe Your Persor | nal and Househo | old Items | | | |
| | | | ole interest in any of the follo | wing items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Exan |) | | inens, china, kitchenware | | | |
| ■ Ye | es. Describe | Furniture | | | | \$400.00 |
| | | Furniture | | | | Ψ400.00 |
| ■ No □ Ye 8. Colle Exan | nples: Televisions ar including cell o es. Describe ctibles of value nples: Antiques and other collection | phones, camer | o, video, stereo, and digital equalities, media players, games sings, prints, or other artwork; bia, collectibles | | | |
| Exan | musical instru | graphic, exercis | se, and other hobby equipment | ; bicycles, pool tables, go | lf clubs, skis; canoes and | kayaks; carpentry tools; |
| ■ No | amples: Pistols, rifles | s, shotguns, am | nmunition, and related equipme | ent | | |
| 11. Clot Exa □ No | amples: Everyday clo | othes, furs, leat | her coats, designer wear, shoe | s, accessories | | |
| | es. Describe | | | | | |
| | | | | | | |

Official Form 106A/B

Schedule A/B: Property

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Page 12 of 55
Case number (if known) Document Debtor 1 Lakeisha K Staten 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Jewelry \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$950.00 for Part 3. Write that number here Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Checking Account Leyden CU \$6.00 17.1. Savings Account with Leyden CU \$25.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Page 13 of 55
Case number (if known) Document Debtor 1 Lakeisha K Staten 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Pension with Chicago Public Schools \$0.00 403b \$0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: ■ Yes. Security Deposit with Landlord \$1,300.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Anticipated 2015 Expected Tax Return \$4.055.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information......

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

Schedule A/B: Property

■ No

☐ Yes. Give specific information..

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Page 14 of 55
Case number (if known) Document Debtor 1 Lakeisha K Staten 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term Life Insurance through Employer \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$5,386.00 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6 ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

List the Totals of Each Part of this Form

| | Case 15-43199 | Doc 1 | Filed 12/23/ | | 2/23/15 14:52:13 | Desc Main |
|--------------------|-------------------------------|----------------|---------------|-------------|---------------------------|------------------|
| Debtor 1 | Lakeisha K Staten | | Document | Page 15 of | Case number (if known) | |
| 55. Part 1 | 1: Total real estate, line 2 | | | | | \$0.00 |
| 56. Part 2 | 2: Total vehicles, line 5 | | | \$19,606.00 | | |
| 57. Part 3 | 3: Total personal and hous | sehold items | , line 15 | \$950.00 | | |
| 58. Part 4 | 4: Total financial assets, li | ne 36 | | \$5,386.00 | | |
| 59. Part \$ | 5: Total business-related p | property, line | 45 | \$0.00 | | |
| 60. Part 6 | 6: Total farm- and fishing- | related prope | erty, line 52 | \$0.00 | | |
| 61. Part 7 | 7: Total other property not | listed, line 5 | 54 + | \$0.00 | | |
| 62. Total | personal property. Add lin | nes 56 througl | า 61 | \$25,942.00 | Copy personal property to | otal \$25,942.00 |

Official Form 106A/B

Schedule A/B: Property

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$25,942.00

| | | 17(7(1)))) | | |
|---------------------|--------------------------|-------------------|-------------|--------------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Lakeisha K Staten | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if the amended f |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Specific laws that allow exemption |
|--|--------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption. |
| 2007 Hyundai Elantra 190000 miles Value per KBB | \$1,260.00 | \$1,260.00 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 3.1 | | □ 100% of fair market value, up to any applicable statutory limit |
| 2010 Lincoln MKS 90000 miles Value per KBB | \$9,919.00 | \$2,400.00 735 ILCS 5/12-1001(c) |
| Line from <i>Schedule A/B</i> : 3.2 | | □ 100% of fair market value, up to any applicable statutory limit |
| Furniture Line from Schedule A/B: 6.1 | \$400.00 | \$400.00 735 ILCS 5/12-1001(b) |
| 2.10 1.011 00.100.00 | | □ 100% of fair market value, up to any applicable statutory limit |
| clothing Line from Schedule A/B: 11.1 | \$350.00 | \$350.00 735 ILCS 5/12-1001(a) |
| Elle Holli Genedale AVB. 11.1 | | □ 100% of fair market value, up to any applicable statutory limit |
| Jewelry Line from Schedule A/B: 12.1 | \$200.00 | \$0.00 735 ILCS 5/12-1001(b) |
| Ello Holli Golloddio FVD. 12.1 | | ☐ 100% of fair market value, up to any applicable statutory limit |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 17 of 55

keisha K Staten Case number (if known)

Lakeisha K Staten Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking Account Leyden CU 735 ILCS 5/12-1001(b) \$6.00 \$6.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Savings Account with Leyden 735 ILCS 5/12-1001(b) \$25.00 \$25.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Anticipated 2015 Expected Tax Return 735 ILCS 5/12-1001(b) \$4,055.00 \$2,309.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

| | | Document Pac | ie 18 of 55 | | |
|---|-----------------------------------|--|-----------------------------|--|-----------------------------------|
| Fill in this informa | tion to identify you | ur case: | | | |
| Debtor 1 | Lakeisha K State | | | _ | |
| Debtor 2 | First Name | Middle Name Last N | ame | | |
| (Spouse if, filing) | First Name | Middle Name Last N | ame | _ | |
| United States Bank | ruptcy Court for the | : NORTHERN DISTRICT OF ILLINOIS | | _ | |
| Case number | | | | | if this is an led filing |
| Official Form | 106D | | | | |
| Schedule D | : Creditors | Who Have Claims Sec | ured by Proper | ty | 12/15 |
| | | f two married people are filing together, both a , number the entries, and attach it to this form | | | |
| . Do any creditors ha | ve claims secured by | your property? | | | |
| ☐ No. Check th | nis box and submit t | his form to the court with your other sched | ules. You have nothing else | e to report on this form. | |
| Yes. Fill in a | II of the information | below. | | | |
| Part 1: List All S | Secured Claims | | | | |
| each claim. If more that | an one creditor has a p | nore than one secured claim, list the creditor separaticular claim, list the other creditors in Part 2. A er according to the creditor's name. | | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Leyden Cred | lit Union | Describe the property that secures the claim | \$17,299.00 | \$9,919.00 | \$7,380.00 |
| Creditor's Name | | 2010 Lincoln MKS 90000 miles Value per KBB | | | |
| 2701 25th A Franklin Parl | | As of the date you file, the claim is: Check all apply. Contingent | that | | |
| Number, Street, Ci | ty, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only ■ Debtor 2 only | | ☐ An agreement you made (such as mortgage car loan) | e or secured | | |
| ☐ Debtor 1 and Debto | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's | ien) | | |
| At least one of the | | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this clain community debt | relates to a | Other (including a right to offset) | | | |
| | Opened 11/01/13 Last Active | Last 4 digits of account number | 3671 | | |
| Date debt was incurre | 11,20,10 | Last 4 digits of account number | <u> </u> | | |
| 2.2 Leyden Cred | lit Union | Describe the property that secures the claim | s: \$6,913.00 | \$5,556.00 | \$1,357.00 |
| Creditor's Name | | 2003 Mercedes Benz CL500 75000 miles Value per KBB Co-signed with Husband | | | |
| 2701 25th A | k, IL 60131 | As of the date you file, the claim is: Check all apply. Contingent | that | | |
| Number, Street, Ci | ty, State & Zip Code | ☐ Unliquidated☐ Disputed | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | | An agreement you made (such as mortgage car loan) | | | |
| Debtor 1 and Debto | = | Statutory lien (such as tax lien, mechanic's | ien) | | |
| At least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | |

At least one of the debtors and another

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 19 of 55

| Debto | r 1 Lakeisha k | Staten | | Case | number (if know) | | | |
|--------|---|---|--|--------------------|----------------------------|------------------------|-------------|--|
| | First Name | Middle Na | ame Last Name | | | | | |
| | eck if this claim re mmunity debt | elates to a | ☐ Other (including a right to offset) | | _ | | | |
| Date d | ebt was incurred | Opened 1/01/15 Last Active 11/30/15 | Last 4 digits of account number | 8672 | | | | |
| Date u | ebt was incurred | 11/30/13 | | | | | | |
| 2.5 | Wells Fargo De Services | ealer | Describe the property that secures the c | laim: | \$3,045.00 | \$2,871.00 | \$174.00 | |
| ! ! | Po Box 3569 Rancho Cucam 91729 | nonga, CA | 2005 Toyota Corolla 125333 mile Value per KBB Co-signed with Sister Surrendering Interest As of the date you file, the claim is: Checapply. □ Contingent | | | | | |
| | Number, Street, City, S | | ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. | | | | | |
| _ | otor 1 only otor 2 only | | An agreement you made (such as morte car loan) | gage or secured | | | | |
| ☐ Del | otor 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | | |
| At I | east one of the deb | tors and another | ☐ Judgment lien from a lawsuit | | | | | |
| | eck if this claim re mmunity debt | elates to a | ☐ Other (including a right to offset) | | _ | | | |
| Date d | ebt was incurred | Opened 1/01/12 Last Active 10/24/15 | Last 4 digits of account number | 3254 | | | | |
| | | | | | | | | |
| Add | the dollar value of | your entries in Co | olumn A on this page. Write that number h | ere: | \$27,257.00 | | | |
| | s is the last page of that number here | | he dollar value totals from all pages. | | \$27,257.00 | | | |
| Part 2 | List Others t | o Be Notified fo | or a Debt That You Already Listed | | | | | |
| Use th | is page only if you ect from you for a | have others to be debt you owe to se ebts that you listed | e notified about your bankruptcy for a debt omeone else, list the creditor in Part 1, an I in Part 1, list the additional creditors here | d then list the co | llection agency here. Simi | ilarly, if you have mo | re than one | |
| | Name Address | S | 2 | ubiah lina in l | Dout 4 did | the executer 2 | | |
| | -NONE- | | On v | vnich line in i | Part 1 did you enter | tne creditor? | | |
| | | | Last | 4 digits of ac | ccount number | | | |

| | | Document | Page 20 of 55 | | | |
|--|---|--|---|--|---|--|
| Fill in t | this information to identify your o | case: | | | | |
| Debtor | 1 Lakeisha K Staten | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor (Spouse | | Middle Name | Last Name | | | |
| | | | | | | |
| United | States Bankruptcy Court for the: | NORTHERN DISTRICT OF I | LLINOIS | | | |
| Case n | umber | | | | | |
| (if known | | | | | Check if this | s is an |
| | | | | | amended fili | ng |
| Offic | ial Form 106E/F | | | | | |
| | | Mha Haya Haasa | urad Claima | | | 4044 |
| | edule E/F: Creditors | | | DITY . I . : | | 12/15 |
| any exect Schedul D: Credi the Cont number | cutory contracts or unexpired leases the G. Executory Contracts and Unexpirtors Who Have Claims Secured by Proinuation Page to this page. If you have (if known). | nat could result in a claim. Also I ed Leases (Official Form 106G). I perty. If more space is needed, c no information to report in a Pai | TY claims and Part 2 for creditors with NONPRIO list executory contracts on Schedule A/B: Proper Do not include any creditors with partially secure copy the Part you need, fill it out, number the enter rt, do not file that Part. On the top of any addition | rty (Officia ed claims ries in the | al Form 106A/l that are listed boxes on the | B) and on d in Schedule e left. Attach |
| Part 1: | List All of Your PRIORITY Uns | secured Claims | | | | |
| 1. | Do any creditors have priority unsecur | ed claims against you? | | | | |
| | No. Go to Part 2. | | | | | |
| | ☐ Yes. | | | | | |
| Part 2: | List All of Your NONPRIORITY | Y Unsecured Claims | | | | |
| 3. | Do any creditors have nonpriority uns | ecured claims against you? | | | | |
| | \square No. You have nothing to report in this | part. Submit this form to the court | with your other schedules. | | | |
| | ■ Yes. | | | | | |
| | — 165. | | | | | |
| | | | of the creditor who holds each claim. If a creditor isted, identify what type of claim it is. Do not list clair | | | |
| 1 | than one creditor holds a particular claim | | you have more than three nonpriority unsecured clair | | | |
| | Part 2. | | | | Total clain | n |
| 4.1 | Anthem | Look A digito of coop | was a was bear | | • | 0.00 |
| | Nonpriority Creditor's Name | Last 4 digits of acco | ount number | _ | \$ | |
| | Po Box 60007 | When was the debt i | incurred? | _ | | |
| | Los Angeles, CA 90060 Number Street City State Zlp Code | | ile the claim is. Check all that apply | | | |
| | Number Street City State Zip Code | As of the date you h | ile, the claim is: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and anot | T (NONDRIGHT | ITY unsecured claim: | | | |
| | ☐ Check if this claim is for a comm | unity | | | | |
| | debt | | | | | |
| | Is the claim subject to offset? | Obligations arising not report as priority of | g out of a separation agreement or divorce that you claims | did | | |
| | ■ No | ☐ Debts to pension | or profit-sharing plans, and other similar debts | | | |
| | Yes | Other. Specify | medical | | | |
| 4.2 | ATC | Last 4 digits of acco | ount number | | \$ | 219.11 |
| | Nonpriority Creditor's Name | | | _ | * | |
| | 405 West 11th Street | When was the debt i | incurred? | _ | | |
| | PO BOX 2027 Alma, GA 31510 | | | | | |
| | Number Street City State Zlp Code | As of the date you fi | ile, the claim is: Check all that apply | | | |

Official Form 106 E/F

| Debtor | 1 Lakeisha K Staten | | 21 of 55 Case number (if know) | Desc Main | |
|--------|--|---|--|-----------|----------|
| | Who incurred the debt? Check one. □ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | | d claim: aration agreement or divorce that you did | | |
| | ■ No | not report as priority claims Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify unsec | | | |
| 4.3 | Capital One | Last 4 digits of account number | 8646 | \$ | 1,905.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim i | Opened 4/01/08 Last Active 6/18/15 s: Check all that apply | | |
| | Who incurred the debt? Check one. ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans | d claim: | | |
| | debt Is the claim subject to offset? | not report as priority claims | aration agreement or divorce that you did | | |
| | No | ☐ Debts to pension or profit-sharin | | | |
| | Yes | Other. Specify Credit | Card | | |
| 1.4 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 8639 | \$ | 3,291.00 |
| | Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 12/01/08 Last Active 7/06/15 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | |
| | Who incurred the debt? Check one. ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | d alaim. | | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Type of NONPRIORITY unsecured Student loans | a ciaim: | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | ■ Other. Specify Credit | Card | | |

Nonpriority Creditor's Name

Citibank / Sears

4.5

1784

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Page 22 of 55 Case number (if know) Document Debtor 1 Lakeisha K Staten Citicorp Credit Srvs/Centralized Opened 6/01/11 Last Bankrup When was the debt incurred? Active 9/11/15 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Charge Account Other. Specify 4.6 3,878.00 Cynthia Thomas Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Address Unknown Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

Judgment

7541

| Nonphonity Creditor's Name | | |
|---|---|--|
| Macys Bankruptcy Department | | Opened 3/01/11 Last |
| Po Box 8053 | When was the debt incurred? | Active 7/08/15 |
| Mason, OH 45040 | | |
| Number Street City State Zlp Code | As of the date you file, the cla | im is: Check all that apply |
| Who incurred the debt? Check one. | ☐ Contingent | |
| ■ Debtor 1 only | | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsec | ured claim: |
| ☐ Check if this claim is for a community debt | ☐ Student loans | |
| Is the claim subject to offset? | Obligations arising out of a snot report as priority claims | separation agreement or divorce that you did |
| ■ No | Debts to pension or profit-sh | naring plans, and other similar debts |
| ☐ Yes | Other, Specify Ch. | arge Account |

Last 4 digits of account number

Other. Specify

☐ Yes

Dsnb Macys

4.7

275.00

\$

Entered 12/23/15 14:52:13 Desc Main Case 15-43199 Filed 12/23/15 Doc 1

Page 23 of 55 Case number (if know) Document Debtor 1 Lakeisha K Staten

| 4.8 | Georgia Power | Last 4 digits of account number | | \$ | 0.00 |
|------|---|--|---|------------|-----------|
| | Nonpriority Creditor's Name 2500 Patrick Henry Parkway Mcdonough, GA 30253 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Notice | only | | |
| 4.9 | Leyden Credit Union | Last 4 digits of account number | 8673 | \$ | 2,675.00 |
| | Nonpriority Creditor's Name | | Opened 9/04/45 Leet | | |
| | 2701 25th Ave Franklin Park, IL 60131 | When was the debt incurred? | Opened 8/01/15 Last Active 11/20/15 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Unliquidated | | | |
| | _ | <u>_</u> | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim: | | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | ☐ Student loans | a ciaiii. | | |
| | debt | Student loans | | | |
| | Is the claim subject to offset? | Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Unsec | eured | | |
| 4.10 | Navient | Last 4 digits of account number | 1110 | \$ | 89,686.00 |
| | Nonpriority Creditor's Name | - | 0 144/04/02 1 | · <u>—</u> | |
| | Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773 | When was the debt incurred? | Opened 11/01/06 Last Active 9/24/13 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |

| Debtor | 1 Lakeisha K Staten | Document Page | Case number (if know) | | |
|--------|---|--|---|-----|----------|
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | Student loans | | | |
| | Is the claim subject to offset? | Obligations arising out of a sepa not report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify | | | |
| | | Educa | itional | | |
| 4.11 | Northwestern Medicine | Last 4 digits of account number | | \$ | 555.10 |
| | Nonpriority Creditor's Name 250 E. Superior Chicago, IL 60611 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Yes | Other. Specify Medica | al | | |
| 4.12 | Sears/cbna | Last 4 digits of account number | 4861 | \$ | 3,224.00 |
| | Nonpriority Creditor's Name | | | · — | |
| | Po Box 6282 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 5/01/13 Last Active 9/17/15 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Charg | e Account | | |
| 4.13 | Spot Loan | Last 4 digits of account number | | \$ | 0.00 |
| | Nonpriority Creditor's Name PO Box 927 | When was the debt incurred? | | · | |
| | Palatine, IL 60078 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 25 of 55 Debtor 1 Lakeisha K Staten Case number (if know) Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ■ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Notice only Other. Specify 4.14 2,905.00 Synchrony Bank/Walmart 8699 Last 4 digits of account number \$ Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/01/13 Last When was the debt incurred? Po Box 103104 Active 6/28/15 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Charge Account Other. Specify 4.15 221.00 Target 0133 Last 4 digits of account number \$ Nonpriority Creditor's Name Opened 8/01/15 Last C/O Financial & Retail Services Mailstop BT PO Box 9475 When was the debt incurred? Active 11/20/15 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

4.16 title Lenders, inc

Nonpriority Creditor's Name

■ No
□ Yes

Last 4 digits of account number

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Credit Card

8521

300.00

\$

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 26 of 55

| Debtor ' | 1 Lakeisha K Staten | | Case number (if know) | | |
|----------|--|--|---|----|-----------|
| | 9572 N Potter Rd Des Plaines, IL 60016 | When was the debt incurred? | 12/5//2015 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit-sharir | ng plans, and other similar debts | | |
| | Yes | ■ Other. Specify payda | yloan | | |
| | Us Dept of Ed/Great Lakes Educational Lo | Last 4 digits of account number | 8581 | \$ | 37,148.00 |
| | Nonpriority Creditor's Name 2401 International Madison, WI 53704 | When was the debt incurred? | Opened 2/01/10 Last Active 4/07/14 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | |
| | At least one of the debtors and another | | a ciami. | | |
| | ☐ Check if this claim is for a community debt | Student loans | | | |
| | Is the claim subject to offset? | Obligations arising out of a sepa not report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit-sharir | ng plans, and other similar debts | | |
| | ☐Yes | Other. Specify | | | |
| | | Educa | ational | | |
| 4.18 | US Small Business Administration | Last 4 digits of account number | | \$ | 0.00 |
| | Nonpriority Creditor's Name Illinois District Office 500 West Madison - Suite 1250 | When was the debt incurred? | | Ψ | |
| | Chicago, IL 60661 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| | Yes | Other. Specify Notice | only | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 27 of 55
Case number (if know)

| Debtor | 1 Lakeisha K Staten | Case number (if know) | |
|--------|---|---|----------------|
| 4.19 | Verizon Nonpriority Creditor's Name P.O. Box 25506 Lehigh Valley, PA 18002-5506 Number Street City State Zlp Code Who incurred the debt? Check one. | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent | \$ 0.00 |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Notice only | |
| 4.20 | WOW Internet & Cable | Last 4 digits of account number | \$ 1,810.00 |
| | Nonpriority Creditor's Name BK Dept PO Box 63000 Colorado Springs, CO 80962 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify unsecured | |
| 4.21 | Zingo Cash Nonpriority Creditor's Name | Last 4 digits of account number When was the debt incurred? | \$ 0.00 |
| | 200 Fairway Drive Vernon Hills, IL 60061 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | _ | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community | Type of NONPRIORITY unsecured claim: Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Notice only | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Page 28 of 55 Document

Case number (if know) Debtor 1 Lakeisha K Staten

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

-NONE-

On which entry in Part 1 or Part2 did you list the original creditor?

Line of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total cla | aim |
|--------------|-----|---|-----|--------------------|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total Claim | |
| | 6f. | Student loans | 6f. | \$ | 126,834.00 |
| Total claims | | | | | <u> </u> |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 23,711.21 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$ | 150,545.21 |

| | | 1212111 | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Lakeisha K Staten | 1 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Eileen Stratus 1696 Orchard Street Des Plaines, IL 60018 | Yearly Lease |

| | | Docume | nt Page 30 of | <u>.55</u> | |
|---------------|--|-------------------------------|-----------------------------|--|---------------------|
| Fill in th | is information to identify your | case: | | | |
| Debtor 1 | Lakeisha K Staten | | | | |
| 200101 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, f | filing) First Name | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case nur | mhar | | | | |
| (if known) | | | | □ Chec | ck if this is an |
| | | | | amer | nded filing |
| | | | | | |
| Officia | al Form 106H | | | | |
| Sche | dule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| | | | | complete and accurate as possible. | |
| | | | | on. If more space is needed, copy the | |
| | and number the entries in the ne and case number (if known) | | | this page. On the top of any Addition | mai Pages, write |
| | ` , | , , | | | |
| 1. Do | o you have any codebtors? (If | you are filing a joint case, | do not list either spouse a | is a codebtor. | |
| □ No | 0 | | | | |
| ■ Ye | es | | | | |
| | | | | _ | |
| 2. W | ithin the last 8 years, have yοι ona, California, Idaho, Louisiana, | I lived in a community pr | operty state or territory | ? (Community property states and term | itories include |
| Alizo | oria, Gaillottila, Idario, Louisiaria, | Nevaua, New Mexico, Fu | erio Nico, Texas, Wasilii | gion, and wisconsin.) | |
| ■ N | o. Go to line 3. | | | | |
| □ Ye | es. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| 3. In Co | olumn 1. list all of your codebt | ors. Do not include your | spouse as a codebtor i | f your spouse is filing with you. List | t the person shown |
| in lir | ne 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make s | ure you have listed the creditor on S | Schedule D (Officia |
| | n 106D), Schedule E/F (Official ut Column 2. | Form 106E/F), or Sched | ule G (Official Form 106 | 6G). Use Schedule D, Schedule E/F, | or Schedule G to |
| IIII O | ut Column 2. | | | | |
| | Column 1: Your codebtor | D.Code | | Column 2: The creditor to whom y | you owe the debt |
| | Name, Number, Street, City, State and ZI | r Code | | Check all schedules that apply: | |
| | | | | | |
| 3.1 | Ameer Staten | | | ■ Schedule D, line2.2 | |
| | 801 Naomi Street | | | ☐ Schedule E/F, line | |
| | Waycross, GA 31501 | | | ☐ Schedule G | |
| | | | | Leyden Credit Union | |
| | | | | | |
| | | | | | |
| 3.2 | Sasha King | | | ■ Schedule D, line2.3 | |
| | 1696 Orchard Street | | | ☐ Schedule E/F, line | |
| | Des Plaines, IL 60018 | | | ☐ Schedule G | |
| | | | | Wells Fargo Dealer Services | |
| | | | | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 31 of 55

| Fill in this informa | ation to identify your case: | |
|---------------------------------|--|--|
| Debtor 1 | Lakeisha K Staten | |
| Debtor 2 (Spouse, if filing) | | |
| United States Ba | inkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | |
| Case number (If known) | | Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter |
| Official Fo | orm 106I | 13 income as of the following date: MM / DD/ YYYY |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Describe Employment | | | | |
|--|---|-----------------------|--------|--|--|
| 1. | Fill in your employment information. | | Debtor | 1 | Debtor 2 or non-filling spouse |
| 1. Fill in your eminformation. If you have mo attach a separa information about employers. Include part-tin self-employed Occupation ma | If you have more than one job, | Employment status | ■ Emp | loyed | ■ Employed |
| | attach a separate page with information about additional | Employment status | | employed | ☐ Not employed |
| | employers. | Occupation | Teach | er | Labor |
| | Include part-time, seasonal, or self-employed work. | Employer's name | MTC | | Live Oaks Home |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | orth Market Place Drive ville, UT 84014 | 2072 Brunswick Hwy Waycross, GA 31503 |
| | | How long employed the | nere? | 5 Months | _1 Month |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

| | | | non | -filing spouse |
|----|-----|----------|-----|----------------|
| 2. | \$ | 3,666.67 | \$ | 2,002.22 |
| 3. | +\$ | 0.00 | +\$ | 0.00 |
| 4. | \$ | 3,666.67 | \$ | 2,002.22 |

For Debtor 2 or

For Debtor 1

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 32 of 55

| Debt | or 1 | Lakeisha K Staten | | C | Case number (if known) | | | | |
|------|--|--|---|----------------------|--|----------------------------------|-------------------------------|--|-----------------------------|
| | Сор | y line 4 here | 4. | | For Debtor 1 \$ 3,666.67 | | Debtor 2 -filing sp 2,0 | | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: | 5a 5b 5c 5d 5e 5f. 5g |). - . - | \$ 542.23 \$ 0.00 \$ 0.00 \$ 0.00 \$ 301.75 \$ 0.00 \$ 0.00 \$ 0.00 | \$ \$ \$ \$ \$ \$ \$ | | 0.00 0.00 0.00 0.00 0.00 702.22 0.00 0.00 | - - - - |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$843.98 | \$ | 1,0 | 99.37 | _ |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ 2,822.69 | \$ | ξ | 02.85 | _ |
| 8. | 8b. 8c. 8d. 8e. 8f. 8g. 8h. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: | 8c 8d 8e 8e | i. I. | \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 | \$ \$ \$ \$ \$ \$ \$ \$ | | 0.00 0.00 0.00 0.00 0.00 | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | | 0.00 | <u> </u> |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | 2,822.69 + \$_ | 9 | 02.85 | = \$ _ | 3,725.54 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | dep | | | • | Schedule 11. | | 0.00 |
| | Writ appl | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes you expect an increase or decrease within the year after you file this form? | in Lia | | | | 12. | \$ Combii monthl | 3,725.54 ned y income |
| | | No. | | | | | | | |
| | \Box | Yes, Explain: | | | | | | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 33 of 55

| | | | | | | 1 | | |
|-------------------|--|---|--------------------------------------|--|--|--------------------------------------|--|--|
| Fill | in this informa | tion to identify y | our case: | | | | | |
| Deb | tor 1 | Lakeisha K S | staten | | | | k if this is: | |
| Deb | tor 2 | | | | | _ | An amended filing A supplement show | wing postpetition chapter |
| (Spo | ouse, if filing) | | | | | | | the following date: |
| Unit | ed States Bankr | uptcy Court for the: | NORTH | ERN DISTRICT OF ILLIN | IOIS | Ī | MM / DD / YYYY | |
| | e number | | | | | | | |
| (lf kı | nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| So | chedule | J: Your | Exper | ses | | | | 12/15 |
| Be info nur | as complete a ormation. If m mber (if know | and accurate as nore space is ne n). Answer eve | possible eded, atta ry questio | . If two married people a ach another sheet to this | | | | |
| Par 1. | t 1: Descr Is this a joir | ibe Your House | hold | | | | | |
| • | No. Go to | | | | | | | |
| | | | in a separ | ate household? | | | | |
| | □N | 0 | | | | | | |
| | □ Y | es. Debtor 2 mu | st file Offic | ial Form 106J-2, Expense | s for Separate Hous | ehold of Deb | tor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D and Debtor 2 | | ■ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Son | | 8 Months | Yes |
| | | | | | Son | | 15 | □ No |
| | | | | | 3011 | | | ■ Yes □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | | penses include f people other t | han | No | | | | |
| | • | d your depende | | Yes | | | | |
| Par | t 2: Estim | ate Your Ongoi | na Month | ly Expenses | | | | |
| Est exp | imate your ex | cpenses as of y | our bankr | uptcy filing date unless | you are using this f plemental <i>Schedul</i> d | orm as a su e <i>J</i> , check th | pplement in a Charle box at the top of | apter 13 case to report of the form and fill in the |
| | | | | government assistance | | | | |
| | ficial Form 10 | | id nave in | cluded it on Schedule I: | Your income | | Your exp | enses |
| | | | | | | | | |
| 4. | | or home owners and any rent for th | | ses for your residence. or lot. | Include first mortgag | Je 4. \$ | | 1,300.00 |
| | If not include | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | • | rty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 0.00 |
| 5. | | owner's associate | | dominium dues our residence, such as ho | ome equity loans | 4d. \$ 5. \$ | | 0.00 |
| ٥. | | g~g~ payiii | J. y. | | oquity louis | σ. ψ | | 0.00 |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 34 of 55

| Deb | otor 1 | Lakeisha | K Staten | Case nur | nber | (if known) | | |
|-----|--------|------------------------------|---|------------------------|-------------|------------|---------------------------------------|---|
| 6. | Utilit | ies: | | | | | | |
| 0. | 6a. | | , heat, natural gas | 6a | . \$ | | 50.00 | |
| | 6b. | | wer, garbage collection | | . \$ | - | 0.00 | |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | | . \$ | | 250.00 | |
| | 6d. | Other. Spe | | | . \$ | | 0.00 | |
| 7. | | | ekeeping supplies | 7 | | | 300.00 | |
| 8. | | | children's education costs | 8 | | | 585.00 | |
| 9. | | | ry, and dry cleaning | 9 | | | 20.00 | |
| | | • | products and services | | . ψ . \$ | - | 20.00 | |
| | | - | ntal expenses | | . ψ . \$ | | 20.00 | |
| | | | Include gas, maintenance, bus or train fare. | 11 | . ψ | | 20.00 | |
| 12. | | | ar payments. | 12 | . \$ | | 105.00 | |
| 13. | | | clubs, recreation, newspapers, magazines, and b | ooks 13 | . \$ | | 0.00 | |
| 14. | | | ributions and religious donations | | . \$ | | 0.00 | |
| | Insur | | | | • | - | 0.00 | |
| | | | surance deducted from your pay or included in lines | 4 or 20. | | | | |
| | 15a. | Life insura | ince | 15a | . \$ | | 0.00 | |
| | 15b. | Health ins | urance | 15b | . \$ | | 0.00 | |
| | 15c. | Vehicle in | surance | 15c | . \$ | | 199.00 | |
| | 15d. | Other insu | rance. Specify: | 15d | . \$ | | 0.00 | |
| 16. | Taxe | s. Do not in | iclude taxes deducted from your pay or included in lir | nes 4 or 20. | | | | |
| | Spec | | , , , | | . \$ | | 0.00 | |
| 17. | | | ease payments: | | | | | |
| | | | ents for Vehicle 1 | 17a | . \$ | | 381.00 | |
| | 17b. | Car payme | ents for Vehicle 2 | 17b | . \$ | | 281.00 | |
| | | Other. Spe | | 17c | . \$ | | 0.00 | |
| | 17d. | Other. Spe | ecify: | 17d | . \$ | | 0.00 | |
| 18. | | | of alimony, maintenance, and support that you d | | • | | 0.00 | |
| | | | your pay on line 5, Schedule I, Your Income (Office | | | | 0.00 | |
| 19. | | | s you make to support others who do not live with | - | \$ | | 0.00 | |
| | Spec | | | 19 | | | | |
| 20. | | | erty expenses not included in lines 4 or 5 of this | | | r Income. | 0.00 | |
| | | | s on other property | 20a | | | 0.00 | |
| | | Real estat | | 20b | | | 0.00 | |
| | | | homeowner's, or renter's insurance | 20c | | | 0.00 | |
| | | | nce, repair, and upkeep expenses | 20d | * | | 0.00 | |
| | | | er's association or condominium dues | 20e | * | | 0.00 | |
| 21. | Othe | r: Specify: | | 21 | +\$ | <u> </u> | 0.00 | |
| 22 | Calci | ulate vour i | monthly expenses | | | | | |
| | | • | through 21. | | 1 | \$ | 3,721.00 | |
| | | | 2 (monthly expenses for Debtor 2), if any, from Offici | al Form 106.I-2 | | \$ | 210.00 | |
| | | . , | , | ar 1 01111 1 1 0 0 0 E | | * | | |
| | 22C. / | Add line 22 | a and 22b. The result is your monthly expenses. | | ' | \$ | 3,931.00 | |
| 23. | | | monthly net income. | | | | | |
| | 23a. | Copy line | 12 (your combined monthly income) from Schedule I | . 23a | . \$ | | 3,725.54 | |
| | 23b. | Copy your | monthly expenses from line 22c above. | 23b | \$ | | 3,721.00 | |
| | | | | | | - | · · · · · · · · · · · · · · · · · · · | 7 |
| | 23c. | | our monthly expenses from your monthly income. is your <i>monthly net income</i> . | 23c | . \$ | | 4.54 | |
| 24. | For ex | kample, do yo ication to the | an increase or decrease in your expenses within an uncrease or decrease in your car loan within the year or determs of your mortgage? | | | | crease because of a | |
| | | | Explain here: | | | | | |
| | ☐ Ye | es. | <u> шхріані пете.</u> | | | | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 35 of 55

| Debtor 1 Lakeisha K Staten | | | | | Case number (if known) | | | |
|---|--|--|--|--|---|---|--|--|
| Fill | in this information to identify yo | ur case: | | | | | | |
| Debtor 2 Lakeisha K Staten Debtor 2 | | | | Check if this is: An amended filing A supplement showing postpetition chapter 13 | | | | |
| (Spc | buse, if filing) | | | e | expenses as of the follow | owing date: | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | MM / DD / YYYY | | | |
| Case number (If known) | | | | ■ N | Non-Filing Spouse | | | |
| Of | fficial Form 106J-2 |) | | | | | | |
| Use Dek fori spa | e this form for Debtor 2's sepa btor 2 have one or more depe- m only with respect to expens ace is needed, attach another swer every question. | r Expenses for Separate household expenses ONLY Indents in common, list the depenses for Debtor 2 that are not reporsheet to this form. On the top of a mold | F Debtor 1 and Debtor dents on both Schedu ted on Schedule J. Be | 2 ma le J a as c | aintain separate hous and this form. Answ omplete and accurat | seholds. <i>If Debtor 1 and</i> er the questions on this e as possible. If more | | |
| 1. | Do you and Debtor 1 mainta ☐ No. Do not complete the Yes | | | | | | | |
| 2. | Do you have dependents? | □No | | | | | | |
| | Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J. | Fill out this information for each dependent | Dependent's relationsh Debtor 2 | ip to | Dependent's age | Does dependent live with you? | | |
| | Do not state the dependents names. | | Son | | 8 Months | □ No ■ Yes | | |
| | | | Son | | 15 | □ No ■ Yes | | |
| | | | | | | □ No □ Yes | | |
| 0 | . De visus europeanine include | _ | | | | □ No □ Yes | | |
| 3. | Do your expenses include expenses of people other th yourself and your dependen | | | | | | | |
| Est exp Incl | enses as of a date after the b lude expenses paid for with n | ur bankruptcy filing date unless y ankruptcy is filed. on-cash government assistance i | if you know the value | as a | supplement in a Cha | apter 13 case to report | | |
| 106 | | luded it on Schedule I: Your Incor | <i>ne</i> (Official Form | | Your expenses | | | |
| 4. | The rental or home ownersh payments and any rent for the | nip expenses for your residence. It ground or lot. | nclude first mortgage | 4. | \$ | 0.00 | | |
| | If not included in line 4: | | | | | | | |
| | 4a. Real estate taxes4b. Property, homeowner's, | . or renter's insurance | | 4a. 4b. | · | 0.00 | | |
| | | pair, and upkeep expenses | | 4c. | · | 0.00 | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 36 of 55

| Deb | or 1 Lakeisha K Staten | Case num | ber (if known) | |
|--------|--|--------------|----------------|--------|
| | 4d. Homeowner's association or condominium dues | 4d. | \$ | 0.00 |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ | 0.00 |
| _ | | | | _ |
| 6. | Utilities: 6a. Electricity, heat, natural gas | 6a. | \$ | 0.00 |
| | 6b. Water, sewer, garbage collection | 6b. | · | 0.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 0.00 |
| | 6d. Other. Specify: | 6d. | * | 0.00 |
| 7. | Food and housekeeping supplies | — 7. | · | 100.00 |
| В. | Childcare and children's education costs | 8. | \$ | 0.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | · | 20.00 |
| 10. | Personal care products and services | 10. | * | 20.00 |
| | Medical and dental expenses | 11. | \$ | 20.00 |
| | Transportation. Include gas, maintenance, bus or train fare. | | | |
| | Do not include car payments. | 12. | | 50.00 |
| | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | | 0.00 |
| | Charitable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insurance. | | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance | 15a. | ¢ | 0.00 |
| | 15b. Health insurance | 15a. 15b. | * | 0.00 |
| | 15c. Vehicle insurance | 15b. | · | 0.00 |
| | 15d. Other insurance. Specify: | 15d. | · | 0.00 |
| 16 | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | 130. | Ψ | 0.00 |
| | Specify: | 16. | \$ | 0.00 |
| 17. | Installment or lease payments: | 47- | Φ. | 0.00 |
| | 17a. Car payments for Vehicle 1 | 17a. | · | 0.00 |
| | 17b. Car payments for Vehicle 2 | 17b. 17c. | · | 0.00 |
| 10 | 17c. Other. Specify: Your payments of alimony, maintenance, and support that you did not report as | | Φ | 0.00 |
| 10. | deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| 19. | Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: | 19. | · | 0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Sche | edule I: Y | our Income. | |
| | 20a. Mortgages on other property | 20a. | * | 0.00 |
| | 20b. Real estate taxes | 20b. | * | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | * | 0.00 |
| 21. | Other: Specify: | 21. | +\$ | 0.00 |
| 22. | Your monthly expenses. Add lines 5 through 21. | | \$ | 210.00 |
| | The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedu | lo I to | | |

^{23.} Line not used on this form.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

| N ₁ | |
|----------------|--|
| חמו | |

☐ Yes.

Explain here: Non filing Spouse lives with Mother and does not pay any rent expense. Mother covers many living expenses.

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 37 of 55

| Fill in this inf | ormation to identify your | case: | | | |
|---------------------|--|----------------------------|----------------------------------|--------------------|-------------------------------------|
| Debtor 1 | Lakeisha K Stater | 1 | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | - | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| | | | | | |
| Official Fo | orm 106Dec | | | | |
| Declara | ation About a | an Individual | Debtor's Sche | dules | 12/15 |
| | | | | | |
| If two married | people are filing together | er, both are equally respo | onsible for supplying correct in | nformation. | |
| | | | | | - |
| | | | | | tement, concealing property, or |
| | . 18 U.S.C. §§ 152, 1341, | | kruptcy case can result in fine | es up to \$250,0 | 00, or imprisonment for up to 20 |
| , oa : 0 : | . 10 010101 33 102, 1011, | 1010, and 00111 | | | |
| | | | | | |
| S | ign Below | | | | |
| | | | | | |
| Did you | pay or agree to pay some | eone who is NOT an attor | rney to help you fill out bankru | uptcy forms? | |
| | | | | | |
| No | | | | | |
| ☐ Yes | . Name of person | | Attach E | Bankruptcy Petit | ion Preparer's Notice, Declaration, |
| | | | | | |
| | | | | ature (Official Fo | |
| | | | | ature (Official Fo | |
| Under ne | nalty of periury. I declare | that I have read the sum | and Signa | ` | orm 119). |
| | nalty of perjury, I declare are true and correct. | that I have read the sum | | ` | orm 119). |
| that they | are true and correct. | that I have read the sum | and Signa | ` | orm 119). |
| that they | | that I have read the sum | and Signa | h this declarati | orm 119). |

Date

Date December 23, 2015

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 38 of 55

| 311 | l in this inforn | nation to identify you | ır case: | | | | | | |
|------|--------------------------|--|-----------------|---------------------------|-----------|---|-----------------------|-------------|------------------------------------|
| De | btor 1 | Lakeisha K State | | e Name | | Last Name | | | |
| De | btor 2 | i ii st i vaine | Middle | , ivaine | | Last Name | | | |
| (Sp | ouse if, filing) | First Name | Middle | e Name | | Last Name | | | |
| Un | ited States Ba | nkruptcy Court for the | NORTHE | RN DISTRICT O |)F ILLI | INOIS | | | |
| Ca | se number | | | | | | | | |
| 1 | nown) | | | | | | | _ | heck if this is an |
| | | | | | | | | ar | mended filing |
| _ | | | | | | | | | |
| | ficial Fo | | | | _ | | _ | | |
| St | atement | of Financial | Affairs f | or Individ | lual | s Filing for B | ankruptcy | | 12/1 |
| | | | | | | ng together, both are | | | |
| | | iore space is needed n). Answer every que | | parate sneet to | tnis id | orm. On the top of ar | iy additional pages | , write you | ur name and case |
| Pa | rt 1: Give D | Details About Your M | arital Status | and Where You | Lived | d Before | | | |
| | | | | | | | | | |
| 1. | What is you | r current marital stat | us? | | | | | | |
| | Married | | | | | | | | |
| | ☐ Not mar | ried | | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywh | ere other than | where | you live now? | | | |
| | □ No | | | | | | | | |
| | Yes. Lis | t all of the places you | lived in the la | st 3 years. Do no | ot inclu | ude where you live no | W. | | |
| | Debtor 1 Pr | ior Address: | | Dates Debtor 1 | | Debtor 2 Prior Ac | ldress: | | Dates Debtor 2 |
| | 200101 111 | 101 7 taa 10001 | | ived there | | 200101 21 1101 710 | | | lived there |
| | 3212 Waln Patterson, | • | | From-To: 2014-June 201 | 5 | ☐ Same as Debtor | 1 | | ☐ Same as Debtor 1 From-To: |
| | r attersori, | GA 31337 | - | 2011 04110 201 | • | | | | 110111110. |
| | 202 Outons | 1 D 4 | | From-To: | | | | | П |
| | 363 Oxford Des Plaine | s, IL 60016 | | 2010-2014 | | ☐ Same as Debtor | 1 | | ☐ Same as Debtor 1 From-To: |
| | | | | | | | | | |
| | | | | | | | | | |
| 3. | | | | | | uivalent in a commu New Mexico, Puerto R | | | y? (Community propert |
| otat | oo ana tomton | oo morado / mzona, o | amorria, raari | s, Louisiana, No | vada, | rew mexico, r deno r | noo, roxao, vvaoriing | jion ana vi | viocorionii.) |
| | ■ No | | 11-1-11-X | O- d-b ((O) | ,,, , , | - 400LI) | | | |
| | ☐ Yes. Ma | ake sure you fill out So | neaule H: Yo | ur Codeptors (Of | ificial I | -orm 106H). | | | |
| Pa | rt 2 Explai | n the Sources of You | ır Income | | | | | | |
| 1 | Did you bay | o any incomo from o | mployment o | or from operation | a a bi | usings during this v | oar or the two prov | vious calo | ndar voare? |
| 4. | | | | | | usiness during this y inesses, including par | | ious calei | iluar years? |
| | If you are filing | ng a joint case and you | ı have income | that you receive | e toge | ther, list it only once u | nder Debtor 1. | | |
| | □ No | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | |
| | | | Debtor 1 | | | | Debtor 2 | | |
| | | | Sources of | income | Gro | oss income | Sources of incor | ne | Gross income |
| | | | Check all th | at apply. | , | fore deductions and lusions) | Check all that app | oly. | (before deductions and exclusions) |
| | | | | | 2,10 | , | | | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main

Page 39 of 55
Case number (if known) Document Debtor 1 Lakeisha K Staten

| | | | | 5.1. | | D.1. | |
|----|------------------------------|---|---|--|--|---|---|
| | | | | Debtor 1 | | Debtor 2 | |
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | y 1 of curre filed for ba | nt year until nkruptcy: | ■ Wages, commissions, bonuses, tips | \$43,992.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |
| | or last caler anuary 1 to | ndar year: December | 31, 2014) | ■ Wages, commissions, bonuses, tips | \$44,204.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |
| | | dar year be December | | ■ Wages, commissions, bonuses, tips | \$88,795.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |
| | List each | · | the gross inco | | ately. Do not include income t | eived together, list it only once | 2.130. 200.01 |
| | | | | Debtor 1 | | Debtor 2 | |
| | | | | Sources of income Describe below | Gross income (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | | y 1 of curre filed for ba | nt year until nkruptcy: | Est. Food Stamps | \$3,066.00 | | |
| | or last caler anuary 1 to | ndar year: December | 31, 2014) | 401k Withdrawal | \$4,000.00 | | |
| Pá | rt 3: Lis | t Certain Pa | ayments You | Made Before You Filed for | Bankruptcy | | |
| 6. | □ No. | Neither D individual During the □ No. □ Yes * Subject | ebtor 1 nor D primarily for a e 90 days befo Go to line 7 List below e paid that cru not include to adjustment | personal, family, or househoure you filed for bankruptcy, discarding the creditor to whom you pareditor. Do not include payment payments to an attorney for to a 4/01/16 and every 3 years both have primarily consumples. | umer debts. Consumer debts ild purpose." id you pay any creditor a total id a total of \$6,225* or more i ints for domestic support oblig his bankruptcy case. is after that for cases filed on umer debts. | n one or more payments and ations, such as child support or after the date of adjustmer | the total amount you and alimony. Also, do |
| | | _ | • | | id you pay any creditor a total | of \$600 or more? | |
| | | No. | Go to line 7 | | | | |
| | | □ Yes | include pay | | | I the total amount you paid that port and alimony. Also, do not | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document

Page 40 of 55 Case number (if known) Debtor 1 Lakeisha K Staten

| prope Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | |
|--|--|--|------------------------------|-----------------------|---------------------|-------------------|-----------------------------------|
| Insider's include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their uoting securities; and any managing agent including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount paid No Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount paid Amount you property on account of a debt that benefited insider? Insider's Name and Address Dates of payment Total amount paid Amount you Reason for this payment solution account of a debt that benefited insider? Insider's Name and Address Dates of payment Total amount paid Amount you Reason for this payment solution account of a debt that benefited insider? Insider's Name and Address Dates of payment Total amount paid Amount you Reason for this payment Include creditor's name Part 43 Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or oustody modifications, and contract disputes. No Yes. Fill in the details. Case title Case number No Nature of the case Court or agency Status of the case Court or agency Status of the case Court or agency Explain what happened No Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian | | Creditor's Name and Address | Dates of payment | | • | Was this pa | yment for |
| Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount paid Amount you still owe Reason for this payment Still owe Stil | Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managin including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such support and alimony. | | | | | | al partner; ny managing agent, |
| 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider? Include payments on debts guaranteed or cosigned by an insider. No | | _ ``` | | | | | |
| insider? Include payments on debts guaranteed or cosigned by an insider. ■ No □ Yes. List all payments to an insider Insider's Name and Address □ Dates of payment □ Total amount □ paid □ Amount you □ Still owe □ Include creditor's name □ Total amount □ paid □ Still owe □ Yes. List all payments to an insider □ Insider's Name and Address □ Dates of payment □ Total amount □ paid □ Amount you □ Still owe □ Include creditor's name □ Total amount □ paid □ Still owe □ Include creditor's name □ Total amount □ paid □ Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? □ List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody □ Yes. Fill in the details. □ Case title □ Case title □ Case number □ No □ Yes. Fill in the information below. □ Yes. Fill in the information below. □ Yes. Fill in the information below. □ Yes. Fill in the details. □ Poper □ Value of to proper □ Poper | | Insider's Name and Address | Dates of payment | | • | Reason for | this payment |
| Insider's Name and Address Dates of payment paid Amount you still owe linclude creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No | 8. | insider? Include payments on debts guaranteed or cos No | | ments or transfer | any property on a | ccount of a de | ebt that benefited an |
| 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Case number No Yes. Fill in the details below. No Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount of the case and the property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No | | | Dates of payment | | | | |
| 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Case number No Yes. Fill in the details below. No Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount of the case and the property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No | Par | t 4: Identify Legal Actions Repossession | ns, and Foreclosures | | | | |
| 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levier Check all that apply and fill in the details below. No | 9. | List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | / cases, small claims action | s, divorces, collecti | on suits, paternity | actions, suppo | rt or custody |
| Check all that apply and fill in the details below. No Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? | | Case number | | | | | |
| Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No | 10. | Check all that apply and fill in the details belo | | erty repossessed, f | oreclosed, garnis | shed, attached | d, seized, or levied? |
| accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No | | Creditor Name and Address | | d | Date | | Value of the property |
| Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? | 11. | 1. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No | | | | amounts from your | |
| court-appointed receiver, a custodian, or another official? | | Creditor Name and Address | Describe the action the | e creditor took | | | Amount |
| | 12. | court-appointed receiver, a custodian, or a | | erty in the possess | | | efit of creditors, a |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main

Debtor 1 Lakeisha K Staten _____ Document Page 41 of 55 Case number (if known) _____

| Par | t 5: List Certain Gifts and Contributio | ns | | | | |
|-----|---|---------------------------|--|----------------|--|---------------------------|
| 3. | Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift. | cruptcy, | did you give any gifts with a total va | alue of more t | han \$600 per persor | ? |
| | Gifts with a total value of more than \$6 per person | 600 | Describe the gifts | | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | d | | | | |
| 4. | Within 2 years before you filed for bank | ruptcy, | did you give any gifts or contributio | ns with a tota | al value of more thar | \$600 to any charity |
| | No☐ Yes. Fill in the details for each gift or | contribu | ution | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo | total | Describe what you contributed | | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | | | |
| | ■ No □ Yes. Fill in the details. Describe the property you lost and how the loss occurred | Includ | ribe any insurance coverage for the I te the amount that insurance has paid. In ginsurance claims on line 33 of Sche | List | Date of your loss | Value of property lost |
| 6. | Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition | prepar | ing a bankruptcy petition? | | | erty to anyone you |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | You | Description and value of any prop transferred | perty | Date payment or transfer was made | Amount of payment |
| 7. | Within 1 year before you filed for bankrupromised to help you deal with your cree Do not include any payment or transfer that | ditors | or to make payments to your credito | | or transfer any prope | erty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | | Description and value of any prop transferred | perty | Date payment or transfer was made | Amount of payment |
| | Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all No | ur busi rs made | ness or financial affairs? as security (such as the granting of a | | perty to anyone, othe | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | any property or received or debts change | Date transfer was made |
| | Person's relationship to you | | | | - | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Page 42 of 55 Case number (if known) Document

Debtor 1 Lakeisha K Staten

| | Person Who Received Transfer Address | Description and property transfer | | Describe any proper payments received paid in exchange | | Date transfer was nade |
|-----|---|--|---------------------------|--|----------------|---|
| | Person's relationship to you | | | | | |
| | _ | Sold property via 363 Oxford Rd. 60016 | | | 1 | November 2014 |
| | None | 00010 | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro | | ny property to a s | elf-settled trust or sim | ilar device of | which you are a |
| | Yes. Fill in the details. | | | | | |
| | | | | | | |
| | Name of trust | Description and | value of the prope | erty transferred | | Date Transfer was made |
| Par | List of Certain Financial Accounts, Ins | struments, Safe Depos | it Boxes, and Sto | rage Units | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? | • | | • | | |
| | Include checking, savings, money market, o houses, pension funds, cooperatives, associ No | | | | anks, credit t | inions, brokerage |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accoun instrument | t or Date accounclosed, sold, moved, or transferred | | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | ear before you filed fo | r bankruptcy, any | safe deposit box or o | ther deposito | ory for securities, |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the contents | | Do you still have it? |
| 22 | Have you stored property in a storage unit o | · | r home within 1 v | ear before you filed for | r bankruntev | |
| | _ | p | · ·········· · , | Jan 201010 Journal 10 | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, S State and ZIP Code) | | Describe the contents | | Do you still have it? |
| Par | 19: Identify Property You Hold or Control | for Someone Else | | | | |
| 23. | Do you hold or control any property that sor for someone. | neone else owns? Incl | lude any property | you borrowed from, a | re storing for | , or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, S Code) | | Describe the property | | Value |
| | | | | | | |

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 43 of 55 ase number (*if known*)

Debtor 1 Lakeisha K Staten

regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Date of notice Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed

Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date Issued Name Address (Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document

Page 44 of 55
Case number (# known) Debtor 1 Lakeisha K Staten

| /s/ Lakeisha K Staten | |
|---|--|
| Lakeisha K Staten | Signature of Debtor 2 |
| Signature of Debtor 1 | |
| Date December 23, 2015 | Date |
| | |
| Did you attach additional pages to <i>Your</i> S | tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107) |
| _ ' ' ' | tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107) |
| Did you attach additional pages to <i>Your S</i> ■ No □ Yes | tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107) |
| ■ No □ Yes | tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107) is not an attorney to help you fill out bankruptcy forms? |
| ■ No □ Yes | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 45 of 55

| Fill in this infor | mation to identify your o | case: | | | |
|---------------------------------|---|---------------------|--|---------------|---|
| Debtor 1 | Lakeisha K Staten | | | | |
| Dahtar 2 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 108 | | | | |
| | | n for Indiv | viduals Filing Under C | hapter | 7 12/15 |
| | lividual filing under chap | | Il out this form if: | | |
| _ | ve claims secured by you | | | | |
| You must file th | ever is earlier, unless the | ithin 30 days after | ot expired. you file your bankruptcy petition or by t e time for cause. You must also send co | | |
| | eople are filing together nd date the form. | in a joint case, bo | oth are equally responsible for supplying | correct info | rmation. Both debtors must |
| | and accurate as possibl | | s needed, attach a separate sheet to this | form. On the | e top of any additional pages, |
| Part 1: List Y | our Creditors Who Have | Secured Claims | | | |
| | tors that you listed in Pa | urt 1 of Schedule F |): Creditors Who Have Claims Secured b | y Property (C | Official Form 106D) fill in the |
| information b | elow. | | | | · |
| Identify the cr | reditor and the property th | nat is collateral | What do you intend to do with the pro secures a debt? | perty that | Did you claim the property as exempt on Schedule C? |
| | | | | | |
| Creditor's L name: | eyden Credit Union | | ☐ Surrender the property.☐ Retain the property and redeem it. | | □ No |
| | | " | Retain the property and enter into a | | Yes |
| | f 2010 Lincoln MKS 9 Value per KBB | 0000 miles | Reaffirmation Agreement. | | |
| property securing debt | | | ☐ Retain the property and [explain]: | | |
| Creditor's I | Leyden Credit Union | | | | П., |
| name: | Leyderi Credit Offici | | ☐ Surrender the property.☐ Retain the property and redeem it. | | □ No |
| | | 0 | Retain the property and enter into a | | Yes |
| Description of | f 2003 Mercedes Ben 75000 miles | z CL500 | Reaffirmation Agreement. | | |
| property securing debt | Value ner KDD | pand | ☐ Retain the property and [explain]: | | |
| Creditor's V | Vells Fargo Dealer Ser | vices | | | □ No |
| name: | Tono i digo Dedici Oci | VI000 | Surrender the property.Retain the property and redeem it. | | □ INO |
| | 2005 Toylata Caralla | 105000! | ☐ Retain the property and enter into a | | ■ Yes |
| Description of | 2005 Toyota Corolla | 125333 MIIES | Reaffirmation Agreement. | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 46 of 55

| 38 (| Form 8) (12/08) |) | | raye 2 |
|-------|-----------------|--|---|--|
| | oroperty | Co-signed with Sister | ☐ Retain the property and [explain]: | |
| ; | securing debt | : Surrendering Interest | | |
| | | | | |
| Pa | rt 2: List Y | our Unexpired Personal Property | Leases | |
| in ti | he informati | on below. Do not list real estate lea | u listed in Schedule G: Executory Contracts and Unexases. Unexpired leases are leases that are still in effectease if the trustee does not assume it. 11 U.S.C. § 365 | t; the lease period has not yet ended. |
| De | scribe your | unexpired personal property lease | s | Will the lease be assumed? |
| | | | | |
| Les | ssor's name: | Eileen Stratus | | □ No |
| | | | | _ |
| | | | | Yes |
| | scription of le | eased Yearly Lease | | |
| Pa | rt 3: Sign | Below | | |
| | perty that is | of perjury, I declare that I have indic subject to an unexpired lease. ha K Staten | cated my intention about any property of my estate that | at secures a debt and any personal |
| X | Lakeisha | | Signature of Debtor 2 | |
| | Signature of | | Signature of Debtor 2 | |
| | Signature (| or Deptor 1 | | |
| | Date [| December 23, 2015 | Date | |
| | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations:

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 51 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Lakeisha K Staten | | Case No. | | | | |
|-------------|---|---|---------------------------------|-----------------------------------|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | |
| | DISCLOSURE OF COMPENSA | ATION OF ATTO | RNEY FOR DE | EBTOR(S) | | | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | | |
| | For legal services, I have agreed to accept | | \$ | 1,425.00 | | | |
| | Prior to the filing of this statement I have received | | | 0.00 | | | |
| | Balance Due | | | 1,425.00 | | | |
| 2. ′ | The source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | |
| 1 | a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemenc. Representation of the debtor at the meeting of creditors andd. [Other provisions as needed] | t of affairs and plan which | n may be required; | | | | |
| 5. I | By agreement with the debtor(s), the above-disclosed fee does not include the following service: | | | | | | |
| | CI | ERTIFICATION | | | | | |
| | I certify that the foregoing is a complete statement of any agreement and any agreement of the statement of | eement or arrangement for | payment to me for re | epresentation of the debtor(s) in | | | |
| D | December 23, 2015 | /s/ Israel Moskovit | | | | | |
| D | Date | Israel Moskovits 6 Signature of Attorne THE SEMRAD LA | ey W FIRM, LLC | | | | |
| | | 20 S. Clark Street 28th Floor | | | | | |
| | | Chicago, IL 60603 | | | | | |
| | | rsemrad@semrad | Fax: (312) 913 0631 llaw.com | | | | |

Name of law firm

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,125000 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial:

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 53 of 55

the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

| Date: 12/23/2015 | |
|---------------------|--------|
| Client Halerda Stal | Client |
| | |
| Attorney | |

Case 15-43199 Doc 1 Filed 12/23/15 Entered 12/23/15 14:52:13 Desc Main Document Page 54 of 55

United States Bankruptcy Court Northern District of Illinois

| In re | Lakeisha K Staten | | Case No. | | |
|-------|---|---|----------|---|--|
| | | Debtor(s) | Chapter | 7 | |
| | VERIFICATION OF CREDITOR MATRIX | | | | |
| | Number of Creditors: | | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | |
| Date: | December 23, 2015 | /s/ Lakeisha K Staten Lakeisha K Staten Signature of Debtor | | | |

Ameer Stat@ase 15-43199 Doc 1 Miletin 23/15 Mentered 12/23/15 14:52:13 Descondinater Servi 2500 Eunienteri Page 55 of 55 Po Box 3569 Rancho Cucamonga, CA 917

Anthem Sasha King WOW Internet & Cable Po Box 60007 1696 Orchard Street BK Dept Des Plaines, IL 60018 PO Box 63000 Colorado Springs, CO Colorado Springs, CO 809

ATC 405 West 11th Street PO BOX 2027 Alma, GA 31510

Sears/cbna Zingo Cash
Po Box 6282 200 Fairway Drive
Sioux Falls, SD 57117 Vernon Hills, IL 60061

Zingo Cash

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Spot Loan
PO Box 927 Palatine, IL 60078

Citibank / Sears Synchrony Bank/Walmart Citicorp Credit Srvs/CentralizednBaBkmkpuptcy Po Box 790040 Po Box 103104 Saint Louis, MO 63179 Roswell, GA 30076

Po Box 8053 Mailstop BT PO Box 9475 Mason, OH 45040 Minneapolis, MN 55440

Dsnb Macys Target
Macys Bankruptcy Department C/O Financial & Retail Services

Georgia Power title Lenders, inc 2500 Patrick Henry Parkway 9572 N Potter Rd Des Plaines, IL 60016

Franklin Park, IL 60131 Madison, WI 53704

Leyden Credit Union Us Dept of Ed/Great Lakes Educational Lo 2701 25th Ave 2401 International

Leyden Credit Union
2701 25th Ave
Franklin Park, IL 60131

US Small Business Administration
Illinois District Office
500 West Madison - Suite 1250 Chicago, IL 60661

Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773

Verizon Verizon P.O. Box 25506 Lehigh Valley, PA 18002-5506